



Parent-Engaged Developmental Monitoring Using CDC's Developmental Milestone Checklists

An Overview of Revisions and Updates

Toni M. Whitaker, MD, FAAP

Division Chief, Developmental Pediatrics
University of Tennessee Health Science Center
Le Bonheur Children's Hospital

CDC's "Learn the Signs. Act Early." Ambassador to TN

Learn the Signs.
Act Early.



Disclosures

- No commercial financial disclosures.
- Pediatric Consultant and Ambassador to Tennessee for the CDC's *Learn the Signs. Act Early.* Program.
 - Grant funding for provision of *Act Early* resources/materials to families and professionals
- Co-author for the milestone revisions



Objectives

- Describe components of developmental surveillance.
- Explain how evidence-based developmental milestones used in parent-engaged developmental monitoring can improve care.
- Use resources from national initiatives to support developmental surveillance, screening, and training for professionals and trainees.



Why Monitor Development?



Developmental disabilities are common and often not identified before school age

- Up to **1 in 4** (≤ 5 years of age) are at moderate to high risk for developmental, behavioral, or social-emotional delays¹
- **1 in 6** (3–17 years of age) has a developmental disability²
- **1 in 44** (8-year-olds) are estimated to have autism spectrum disorder³

1. *National Survey of Children's Health, 2011-12*

2. *Zablotsky, B, et al, Pediatrics 2019*

3. *CDC, MMWR Surveillance Summary 12/2021*



Earlier Intervention is Better

- Many children with a developmental disability are not identified until after entering school
 - Autism median age diagnosis over 4 years of age
CDC, March 2020 (data from 2016) and December 2021 (from 2018)
- Evidence shows that starting supports and intervention early can improve
 - Health
 - Education
 - Mental health/behavior
 - Child welfare
- Other benefits of early identification & intervention
 - Families understand their child's strengths, and areas they may need support



Medical Providers Can Reach Families



- Physicians/Health Care Providers in a Medical Home are trusted for information
 - Asking opens dialogue
 - Prepare for future conversations
 - Parents could assume incorrectly if not discussed
- Parents appreciate screening
 - Reassurance when their child is developing as expected
 - Affirmation and action when they have concerns



AAP Surveillance Guidelines

- **Developmental Surveillance** (Monitoring) should occur at every health supervision visit
 - Ongoing process
 - Flexible, longitudinal, continuous, and cumulative
 - Should also help to identify children who may be at risk for developmental delays, and who may benefit from additional screening



6 Components of Surveillance

1. Eliciting and attending to the **PARENT'S CONCERNS**
2. Obtaining, documenting, and maintaining a **DEVELOPMENTAL HISTORY**
3. Making accurate and informed **OBSERVATIONS** of the child
4. Identifying **RISKS, STRENGTHS, AND PROTECTIVE FACTORS**
5. Maintaining an accurate record of the **PROCESS AND FINDINGS**
6. **SHARING AND OBTAINING** opinions and findings with other professionals

Surveillance/Monitoring is NOT screening

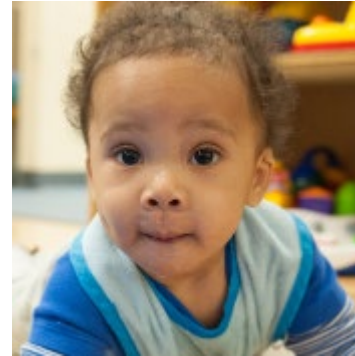


AAP Screening Guidelines

American Academy of Pediatrics (AAP) recommends developmental screening at well-child visits

- All children screened to assess their general development at **9, 18 & 30** months
- All children screened for Autism (ASD) at **18 & 24** months
- Surveillance at 4- to 5-year well visit
- + make up missed screen next visit
- + screening anytime a concern

Screening is NOT diagnosis



9-Month-Old



18-Month-Old



24-Month-Old



30-Month-Old

AAP Policy - *Pediatrics* 2020,
Lipkin and Macias



Developmental Surveillance vs Screening

Surveillance

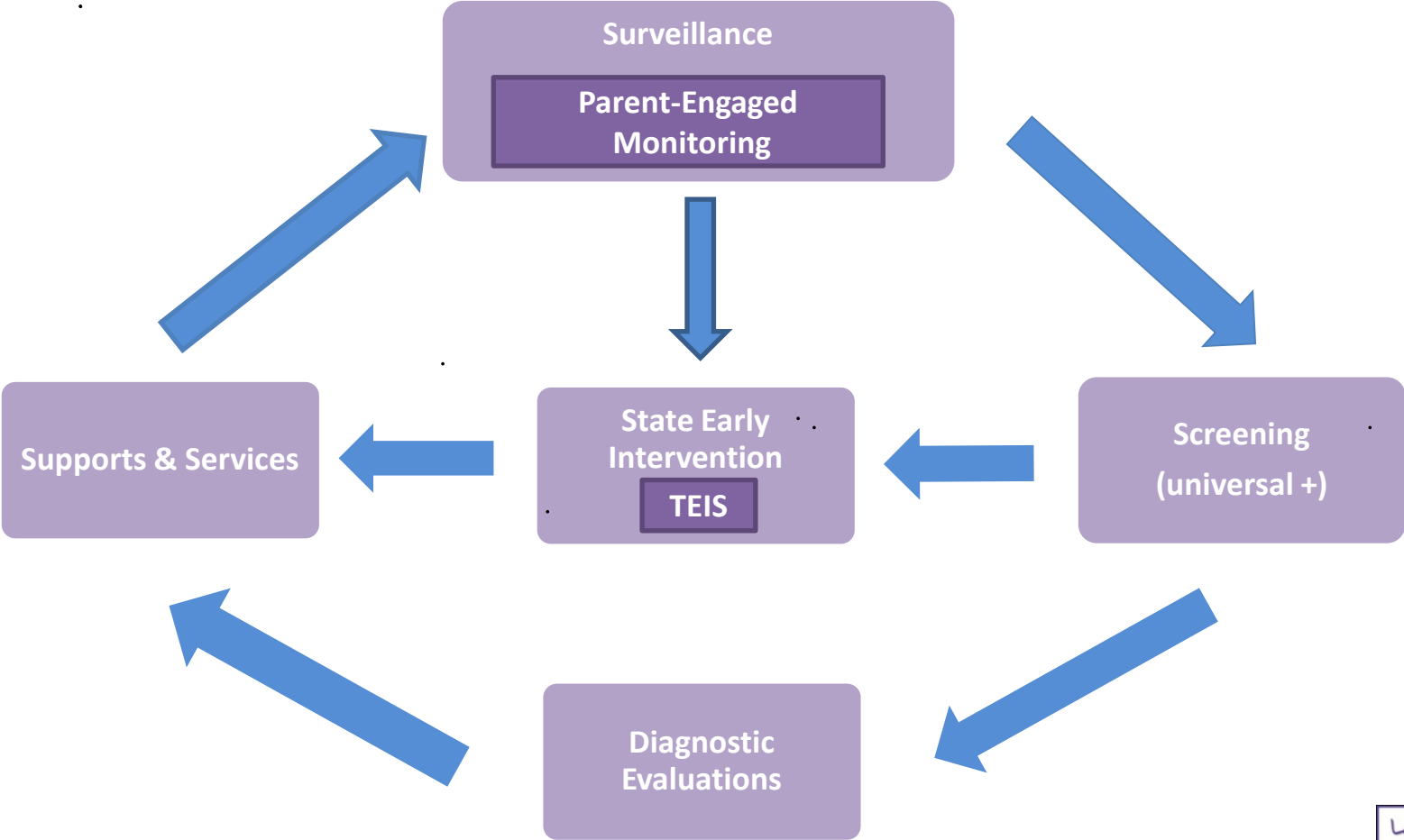
- Occurs at each well child visit
- Uses developmental milestones and much more
- Families and early childhood professionals also monitor development (team approach)
- Ongoing
- No scores, no risk categorization
- Can support the need for any additional developmental screening

Screening

- Administered by professionals
- Recommended at specific ages
- Recommended if concerns other times
- Uses validated developmental screening tools with milestones
- Provides risk categorization/scores
- Not diagnostic
- Helps determine if diagnostic evaluations are needed



Early Identification & Intervention



Developmental Monitoring

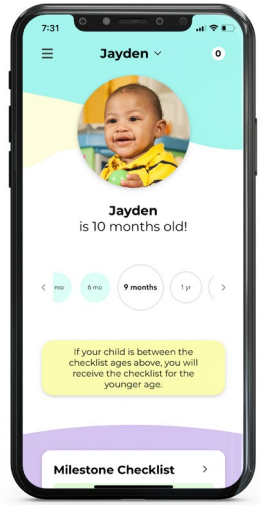


- Helps with early identification
- Adds different information than screening alone
 - Longitudinal
 - More than milestones
- Education/protective
- Developmental promotion
- Family engagement and trusting relationships



CDC's Milestone Checklists

Health Communication Tools



Your child at 15 months

Child's Name _____ Child's Age _____ Today's Date _____

Milestones matter! How your child plays, learns, speaks, acts, and moves offers important clues about his or her development. Check the milestones your child has reached by 15 months. Take this with you and talk with your child's doctor at every well-child visit about the milestones your child has reached and what to expect next.

What most children do by this age:

Social/Emotional Milestones

- Copies other children while playing, like taking toys out of a container when another child does
- Shows you an object she likes
- Claps when excited
- Hugs stuffed doll or other toy
- Shows you affection (hugs, cuddles, or kisses you)

Language/Communication Milestones

- Tries to say one or two words besides "mama" or "dada," like "ba" for ball or "da" for dog
- Looks at a familiar object when you name it
- Follows directions given with both a gesture and words. For example, he gives you a toy when you hold out your hand and say, "Give me the toy."
- Points to ask for something or to get help

Cognitive Milestones (learning, thinking, problem-solving)

- Tries to use things the right way, like a phone, cup, or book
- Stacks at least two small objects, like blocks

Movement/Physical Development Milestones

- Takes a few steps on his own
- Uses fingers to feed herself some food

Other important things to share with the doctor...

- What are some things you and your child do together?
- What are some things your child likes to do?
- Is there anything your child does or does not do that concerns you?
- Has your child lost any skills he/she once had?
- Does your child have any special healthcare needs or was he/she born prematurely?

You know your child best. Don't wait. If your child is not meeting one or more milestones, has lost skills he or she once had, or you have other concerns, act early. Talk with your child's doctor, share your concerns, and ask about developmental screening. If you or the doctor are still concerned:

1. Ask for a referral to a specialist who can evaluate your child more; and
2. Call your state or territory's early intervention program to find out if your child can get services to help. Learn more and find the number at cdc.gov/FindEI.

For more on how to help your child, visit cdc.gov/Concerned.

Don't wait. Acting early can make a real difference!

Download CDC's free milestone tracker app

American Academy of Pediatrics



Milestone Moments

Milestones Matter!

Look inside for milestones to watch for in your child and tips for how you can help your child learn and grow from birth to age 5.

CDC Download CDC's free milestone tracker app American Academy of Pediatrics

www.cdc.gov/ActEarly/Materials



Why Revise?

Incorporate feedback from 15+ years of use

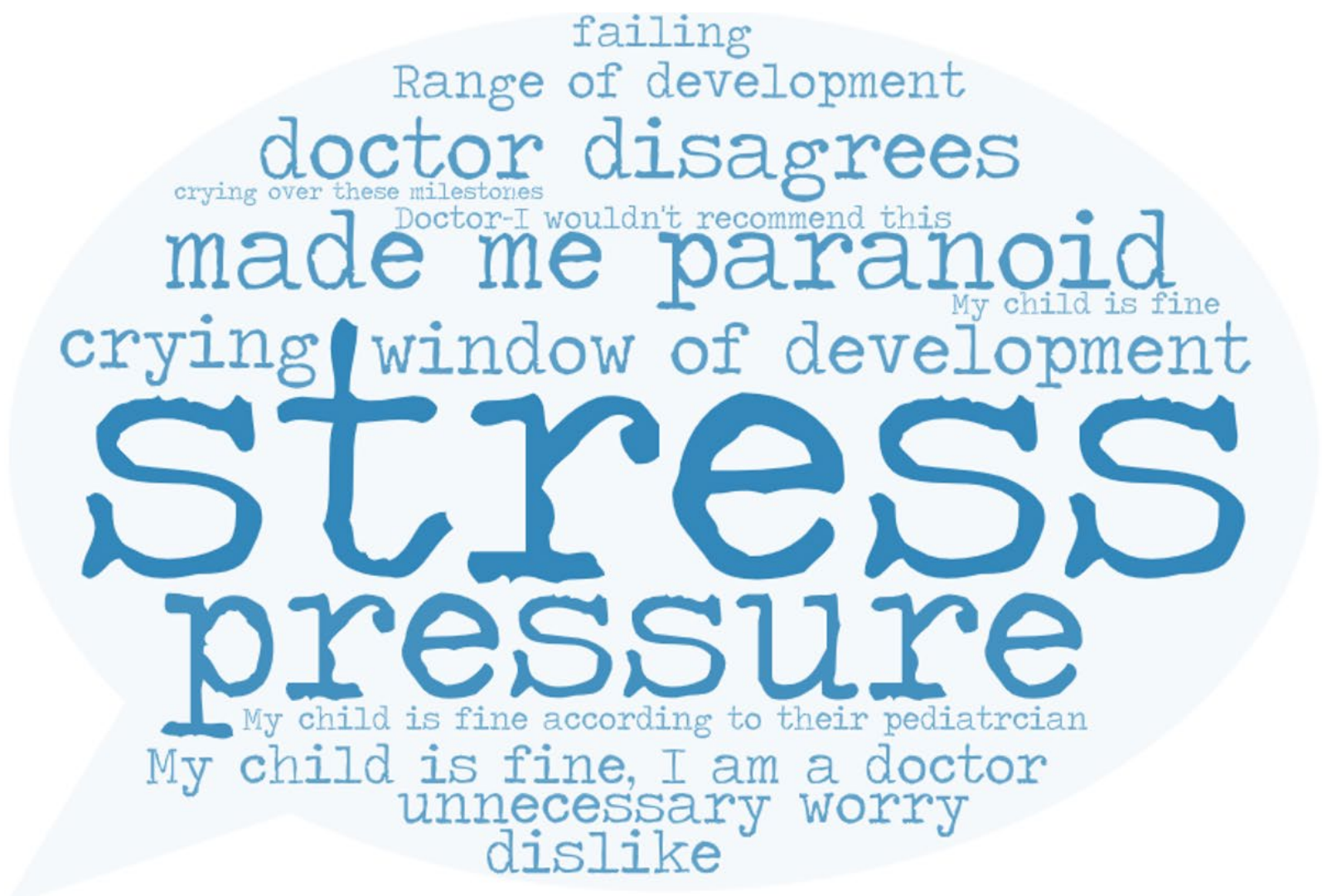
- Where are 15- and 30-month checklists?
- Vague (“may”, “begins”)
- “How many milestones can be missing before concerned?”
- Are only the “warning signs” important?
- Are these milestones MOST children do by this age?



Learn the Signs.
Act Early.



Unnecessary Worry?



failing
Range of development
doctor disagrees
crying over these milestones
Doctor-I wouldn't recommend this
made me paranoid
My child is fine
crying window of development
stress
pressure
My child is fine according to their pediatrician
My child is fine, I am a doctor
unnecessary worry
dislike

Developmental Expertise

- Developmental-behavioral pediatricians
- Neurodevelopmental pediatrician
- General pediatrician
- Speech language pathologist
- Child and developmental psychologists
- Professor of special education and early intervention
- Developer of developmental screening tools
- Editor of *Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents 4th Edition*
- Authors of AAP's 2020 *Promoting Optimal Development: Identifying Infants and Young Children with Developmental Disorders Through Developmental Surveillance and Screening*
- Parent representative/disability navigator
- CDC *Learn the Signs. Act Early.* Ambassador



Developed 11 Criteria

1. Age most ($\geq 75\%$) children would be expected to demonstrate the milestone
2. Eliminate “warning signs”
3. Easy for families of different social, cultural, and ethnic backgrounds to observe
4. Able to be answered with yes/not yet
5. Use plain language; avoiding vague terms like may, can, and begins
6. Organize in developmental domains
7. Show progression of skills with age, when possible
8. No repetition across checklists
9. Include open-ended questions
10. Include information for developmental promotion
11. Include information on how to act early if there are concerns



Why “Most” ($\geq 75\%$)?

- Traditionally, milestone lists use 50th percentile or average age milestones
 - Half of children not expected to exhibit the milestone yet
- What if a child is missing 50th percentile milestones?
 - May cause unnecessary parental concern
 - May result in “wait and see” approach by professionals
- $\geq 75^{\text{th}}$ percentile milestones may better support validated screening as next step for children missing milestones



Evaluating “Most”

- Literature search to find individual milestones with normative data
 - 34 articles found
 - 24 had normative data
 - 10 published clinical opinion
- First reviewed existing milestones for evidence-base and age placement using:
 - Literature review data
 - Common screening and evaluation tools
 - Common published clinical opinion
- Original milestones without an evidence-base and expert agreement were eliminated
- New milestones with evidence and expert agreement were added



Additional Sources

TABLE 2 Additional Developmental Resources Reviewed

Parent Resources	Educational/Training Resources	Developmental Screening Tools	Diagnostic Evaluation Tools ^a
AAP Bright Futures Previsit Questionnaires ¹⁰	AAP Bright Futures guidelines (4th ed) ⁹ AAP <i>Pediatrics in Review</i> articles ^{15–21}	Ages & Stages Questionnaires (3rd ed) ²²	Bayley Scales of Infant and Toddler Development (3rd ed) ²⁷
American Speech-Language-Hearing Association development charts ¹¹		Ages & Stages Questionnaires: Social-Emotional ²³	Beery-Buktenica Developmental Test of Visual-Motor Integration (6th ed) ²⁸
AAP brochure “Is Your One-Year-Old Communicating With You?” ¹²		Modified Checklist for Autism in Toddlers, Revised ²⁴	BRIGANCE Early Childhood Screens III ²⁹
CDC <i>Learn the Signs. Act Early.</i> checklists ¹³		Parents’ Evaluation of Developmental Status With Developmental Milestones ²⁵	The Capute Scales: Cognitive Adaptive Test/Clinical Linguistic and Auditory Milestone Scale ³⁰
FIRST WORDS Project 16 × 16 ¹⁴		Survey of Well-Being in Young Children ²⁶	MacArthur-Bates Communicative Development Inventories (2nd ed) ³¹
			Mullen Scales of Early Learning ³²
			Peabody Developmental Motor Scales (2nd ed) ³³
			Preschool Language Scale-5 ³⁴

^a Diagnostic evaluation tools were cross referenced when there was lack of agreement supporting a milestone or age of a milestone across other data sources. Not all milestones were cross referenced with diagnostic resources.

Zubler JM, Wiggins LD, Macias MM, et al. Evidence-Informed Milestones for Developmental Surveillance Tools. *Pediatrics*. 2022;149(3):e2021052138. Reproduced with permission from *Pediatrics*, Vol. 149, Page 4, Copyright © 2022 by the AAP.



Biggest Challenges



- Normative data difficult to find
 - Typical developmental milestone tables
 - Resources used for such tables are not usually cited
 - Cite each other
- Screeners/psychometric tests - based on unpublished normative data
- Even when normative data exists milestones don't “fit” nicely into health supervision visit ages



“Evidence-Informed”

TABLE 3 Social Emotional Milestones With Supporting Normative Data, Evaluation Tools, and Published Clinical Opinion References

Social Emotional Milestones	Age	CDC or New	Normative Data ^a	Developmental Screening and Evaluation Tools ^b	Published Clinical Opinion ^c
Calms down when spoken to or picked up*	2mo.	New	Ertem et.al ⁵² ,2018		ASHA ²⁸ ; Bright Futures ⁵⁴ ; Dosman et.al ⁷ ,2012; Sharp et.al. ⁵³ ,2008
Looks at your face	2mo.	CDC	Ertem et.al ⁵² ,2018; Sheldrick,R.C and Perrin, E. C. ¹³ ,2013		Bright Futures ⁵⁴ ; Dosman et.al ⁷ ,2012; Scharf et.al ³⁵ ,2016
Seems happy to see you when you walk up to her	2mo.	New	Ertem et.al ⁵² ,2018; Sheldrick,R.C and Perrin, E. C. ¹³ ,2013; Thalagala et.al ⁵⁵ ,2015		
Smiles when you talk to or smile at her	2mo.	CDC	Bhave et.al ⁵⁶ ,2010; Ertem et.al ⁵² ,2018; Lejarraga et.al ⁵⁷ ,2010; Thalagala et.al ⁵⁵ ,2015	ASQ-3 ³⁹ ; PEDS-DM ⁴²	ASHA ²⁸
Smiles on his own to get your attention	4mo.	CDC	Ertem et.al ⁵² ,2018	ASQ-3 ³⁹ ; PEDS-DM ⁴²	Bright Futures ⁵⁴
Chuckles (not yet a full laugh) when you try to make her laugh	4mo.	New	Accardo P. and Capute A. ⁴⁷ ,2005; Bhave et.al ⁵⁶ ,2010; Ertem et.al ⁵² ,2018; Sheldrick, R.C and Perrin, E. C. ¹³ ,2013	ASQ-3 ³⁹ ; PEDS-DM ⁴²	ASHA ²⁸ ;Bellman et.al ¹⁷ ,2013; Bright Futures ⁵⁴
Looks at you, moves, or makes sounds to get or keep your attention	4mo.	New	Ertem et.al ⁵² ,2018	PEDS-DM ⁴²	

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Remaining Criteria



- Reviewed using remaining criteria
- LTSAE team also reviewed for:
 - Family friendly
 - Reading level
- Cognitive testing with English and Spanish-speaking parents, mothers and fathers from different
 - Racial groups
 - Educational levels
 - Income levels



Results of the Process

- Revisions completed in 2019
 - Publication of the process and new milestone checklists in 2/2022
- 26% reduction in total milestones
 - 216 to 159 milestones
 - 25 duplicates removed
 - Average number of milestones/checklist was reduced from 23 to 13
- 40% milestone replacement
 - 94 retained and 65 new
- 1/3 of retained milestones were moved to a different age
 - 2/3 moved to older age
- 80% of the final milestones had normative data from ≥ 1 source
- Social-emotional and cognitive milestones were the most difficult to find



Pediatrics February 2022



More information about the revision process can be found in the article

“Evidence-Informed Milestones for Developmental Surveillance Tools”

Zubler, Wiggins, Macias, Whitaker, Shaw, Squires, Pajek, Wolf, Slaughter, Broughton, Gerndt, Mlodoch, Lipkin

<https://doi.org/10.1542/peds.2021-052138>



Your child at 15 months



Child's Name _____

Child's Age _____

Today's Date _____

Milestones matter! How your child plays, learns, speaks, acts, and moves offers important clues about his or her development. Check the milestones your child has reached by 15 months. Take this with you and talk with your child's doctor at every well-child visit about the milestones your child has reached and what to expect next.

What most children do by this age:

Social/Emotional Milestones

- Copies other children while playing, like taking toys out of a container when another child does
- Shows you an object she likes
- Claps when excited
- Hugs stuffed doll or other toy
- Shows you affection (hugs, cuddles, or kisses you)

Language/Communication Milestones

- Tries to say one or two words besides "mama" or "dada," like "ba" for ball or "da" for dog
- Looks at a familiar object when you name it
- Follows directions given with both a gesture and words. For example, he gives you a toy when you hold out your hand and say, "Give me the toy."
- Points to ask for something or to get help

Cognitive Milestones (learning, thinking, problem-solving)

- Tries to use things the right way, like a phone, cup, or book
- Stacks at least two small objects, like blocks

Movement/Physical Development Milestones

- Takes a few steps on his own
- Uses fingers to feed herself some food

Other important things to share with the doctor...

- What are some things you and your child do together?
- What are some things your child likes to do?
- Is there anything your child does or does not do that concerns you?
- Has your child lost any skills he/she once had?
- Does your child have any special healthcare needs or was he/she born prematurely?

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1. Ask for a referral to a specialist who can evaluate your child more; and
2. Call your state or territory's early intervention program to find out if your child can get services to help. Learn more and find the number at cdc.gov/FindEI.

For more on how to help your child, visit cdc.gov/Concerned.

Don't wait.
Acting early can make
a real difference!



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free Milestone
Tracker app



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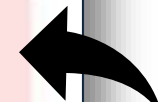
Learn the Signs.
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4 developmental domains at each age



Encouragement and suggestions to act early when needed

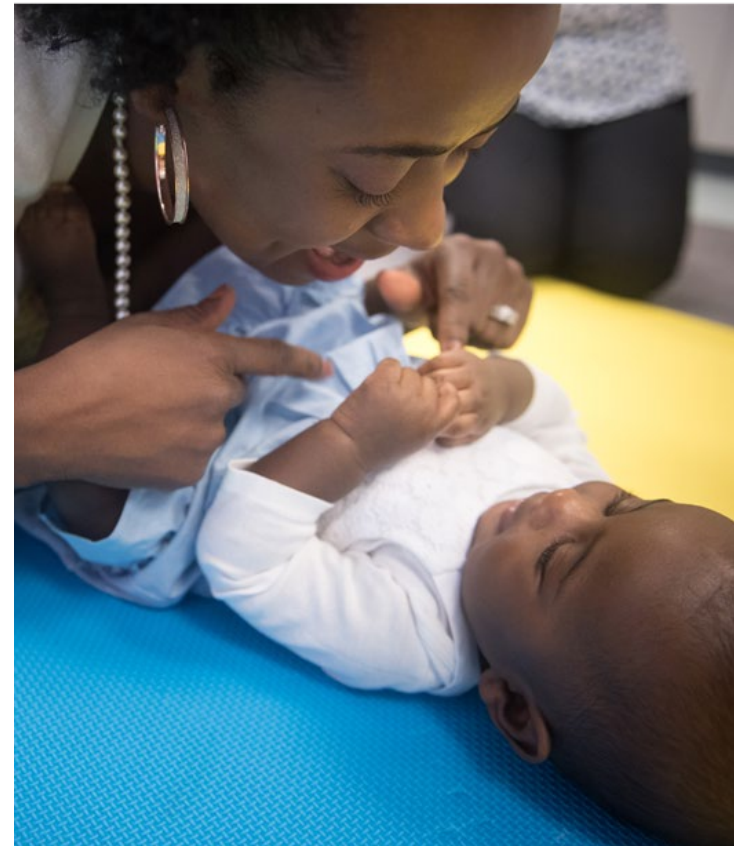


Tips on talking to the doctor



Additional Checklist Features

- Open-ended questions (*new*)
- Act early messaging
- Early intervention information
- Tips and activities for developmental promotion and early relational health (*revised/expanded*)
- Reminders about developmental screening



Learn the Signs.
Act Early.



Open-Ended Questions

Other important things to share with the doctor...

- What are some things you and your child do together?
- What are some things your child likes to do?
- Is there anything your child does or does not do that concerns you?
- Has your child lost any skills he/she once had?
- Does your child have any special healthcare needs or was he/she born prematurely?



Where are the “Red Flags”?

- “When to act early” milestones served as “red flags”
- 77% of these milestones are still represented in the revised checklists
- Missing any milestone that 75% or more of children are expected to exhibit could warrant screening
- What about the ones that were deleted?
 - Physical exam findings or were subjective
- Open ended questions can also help identify concerns:
 - *“Is there anything your child is doing or is not doing that concerns you?”*
 - *“Has your child lost any skills he/she once had?”*



Parent Tips and Activities

- Used CDC's positive parenting tips as foundation
 - www.cdc.gov/ncbddd/childdevelopment/positiveparenting/
- Reviewed parenting tips from trusted organizations
- CDC communication expert, early childhood educator, pediatrician, speech language pathologist
- CDC nutrition, injury prevention, LTSAE and other CDC groups reviewed and made recommendations
- Looked for areas for improvement/expansion
- Reworded for clarity and added more examples
- Included social emotional, relational health, responsive parenting & feeding, self-care, screen time



Developmental Screening Reminders

Your child at 18 months*

Child's Name _____

Child's Age _____

Today's Date _____

Milestones matter! How your child plays, learns, speaks, acts, and moves offers important clues about his or her development. Check the milestones your child has reached by 18 months. Take this with you and talk with your child's doctor at every well-child visit about the milestones your child has reached and what to expect next.



What most children do by this age:

Social/Emotional Milestones

- Moves away from you, but looks to make sure you are close by
- Points to show you something interesting
- Puts hands out for you to wash them
- Looks at a few pages in a book with you
- Helps you dress him by pushing arm through sleeve or lifting up foot

Language/Communication Milestones

- Tries to say three or more words besides "mama" or "dada"
- Follows one-step directions without any gestures, like giving you the toy when you say, "Give it to me."

Cognitive Milestones

Movement/Physical Development Milestones

- Walks without holding on to anyone or anything
- Scribbles
- Drinks from a cup without a lid and may spill sometimes
- Feeds herself with her fingers
- Tries to use a spoon
- Climbs on and off a couch or chair without help

* It's time for developmental screening!

At 18 months, your child is due for general developmental screening and an autism screening, as recommended for all children by the American Academy of Pediatrics. Ask the doctor about your child's developmental screening.

Strengths

Tools to support conversations that may:

- Improve clarity
- Improve sharing concerns
- Improve sharing concerns when there is no corresponding milestone
- Decrease “wait and see”/support trusting relationships
- Support screening as a next step
- Additional tips/activities for developmental promotion



Relatable and Accessible

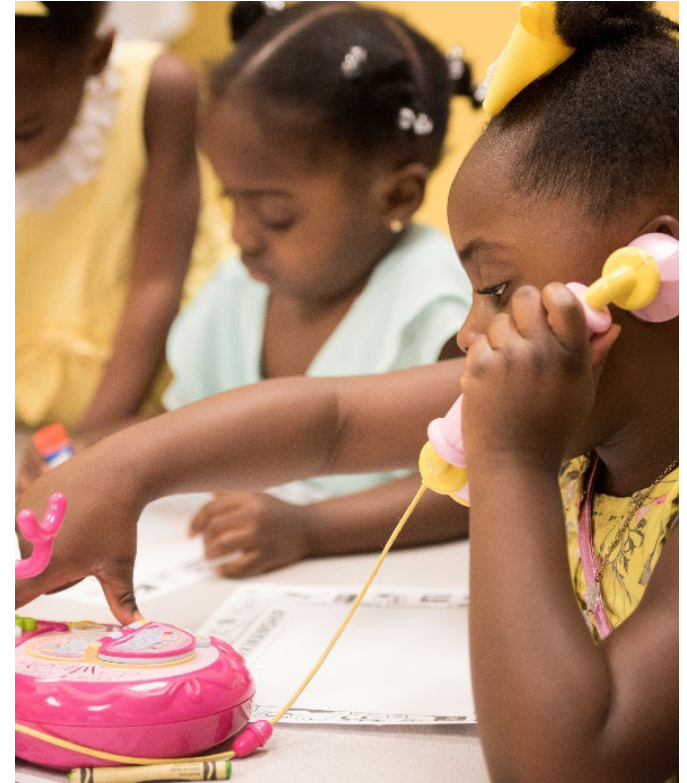


- International normative data used to determine milestones
- Reviewed by 2 native Spanish speaking pediatricians
- Milestones are those that can be observed in natural settings
- Written using family-friendly language
- Cognitively tested milestone descriptions with a diverse group of parents
 - *“Says about 50 words.”* Parents described the milestone as asking whether a child has *“a few words”* or *“a lot of words.”*
- Free!



Checklist Limitations

- CDC surveillance tools are not developmental screeners or formal evaluation tools
- Not validated (as screening tools are)
- Not inclusive of all potential milestones
- Surveillance is more than milestones/checklists
- Need more testing to see how they
 - Improve conversations
 - Support developmental surveillance
 - Support screening as a next step



Learn the Signs.
Act Early.



LTSAE: More Than Materials

Mission: To improve early identification of developmental delays and disabilities by promoting developmental monitoring and screening so children and their families can get the services and support they need.

Materials



Strategy



AAP Partnership

Clinician Tip Sheet

Identifying Risks, Strengths, and Protective Factors for Children and Families: A Resource for Clinicians Conducting Developmental Surveillance



Free Online Courses

ONLINE COURSE

Milestones Matter: Don't Underestimate Developmental Surveillance

PediaLink
The AAP Online Learning Center

ONLINE COURSE

Innovative Strategies for Improving Developmental Surveillance and Screening

PediaLink
The AAP Online Learning Center

Family-friendly Guide to Next Steps

Developmental Concern? Next Steps for Families and Caregivers



Your child has many strengths and a supportive family. Together, we want your child to have what he/she/they need to learn and grow. Today our office is referring your child to see if services might help their learning and development and/or see if your child may have developmental delays.



If your **child is under 3 years of age**, one of the places our office may refer you to is _____ (Name)

your state's early intervention program. If referred to early intervention, the program will evaluate your child at no cost and provide early intervention services, if they qualify, for minimal to no cost.



If your **child is over 3 years of age**, our office may ask you to call your local public elementary school _____ (Name)

When you call the school you can say, "I have concerns about my child's development and I would like to have my child evaluated through the school system for preschool special education services." If the person who answers is unfamiliar with preschool special education, ask to speak with the school or district's special education director.



Along with referring your child to your state's early intervention, preschool special education, or Head Start program, our office may refer them to see one or more early childhood professionals, or programs, including:

- Physical Therapist** (addresses delays in head control, sitting, walking, running, jumping, kicking, or climbing).
- Occupational Therapist** (addresses sensory issues and delays in reaching, using hands together, self-feeding, undressing/dressing).
- Speech and Language Pathologist** (addresses delays in understanding and making speech sounds, words, having conversations, feeding problems, stuttering).
- Behavioral Therapist or Social worker** (addresses trouble engaging socially, paying attention to others, or having behavioral challenges).
- Early Childhood Care and Education**, eg. Head Start (provides early childhood education, health, nutrition, and family engagement services to children and families/caregivers).
- Other:** _____



Final Steps:

1. Keep your follow up appointments at our office.
2. Contact our office if you are having trouble making the referral appointments.
3. Let our office know what the professional/specialist said and any next steps they recommend by:
 - Making an appointment at our office to discuss.
 - Contacting _____
 - Other _____
4. Start any early intervention services your child qualifies for, even if you are waiting for other appointments to find out if there is a cause/diagnosis for any delays.

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Learn the Signs.
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Post-Release Recap

“Screen your young child early and often for developmental delays.”

“...allows pediatricians to more quickly and effectively identify delays so they can help families...”

“Thanks to these changes, worried parents everywhere can let out huge sighs of relief and feel confident in taking whatever next step they think is appropriate for their child(ren).”

- People are talking about child development!
- Higher engagement with resources than ever!
 - 2.7M LTSAE webpage visits in Feb 2022 compared to average 1.3M monthly
 - 59K app downloads in Feb 2022 compared to average 25K monthly
 - Article metrics show high numbers of views
- Opportunity to engage with new partners: SLPs, PTs, OTs
- Chance to clarify purpose, identify research gaps, explain context and challenges of early identification



Comments from Leaders in the Field

Dr. Paul Dworkin, Help Me Grow National Center

[Strengthening Developmental Surveillance to Enhance Developmental Promotion and Early Detection • Help Me Grow National Center](#)

“... simply a reflection of the intent to more clearly identify children who are lagging behind the majority of their peers and to encourage a closer look at children, through such methods as screening, when they are not meeting age expectations.”

“For those who understand the intent and purposes of this revision, the new CDC developmental checklists should be a welcome addition to our developmental monitoring and early detection strategies.”

Dr. Barbara Howard, Johns Hopkins University, creator of CHADIS

[What Can be New About Developmental Milestones? \(medscape.com\)](#)

“As primary care providers, we not only need to detect children at risk for developmental problems but also promote and celebrate developmental progress. I hope that changing the threshold for concern to 75% will allow for a more positive review with the family...”

- “The recommended “use of validated screening tools” when the new milestones are not met give us an objective tool to share with parents, more confidence in when referral is warranted...and baseline documentation from which we can “track” referrals, progress, and, hopefully, better outcomes.”

Zero to Three

[Leading Early Childhood Development Nonprofit Applauds New Pediatric Milestones •](#)

[ZERO TO THREE](#)

“By moving... specific milestones from 50 percent to 75 percent, we will be able to move away from ‘wait and see’ to a more direct and targeted approach. When we know what our children are facing, we can move toward earlier intervention and, ultimately, better outcomes.”



Take Aways (LTSAE Milestones)

- *Learn the Signs. Act Early.* program and CDC's Milestone Checklists:
 - CDC's health communication tools are designed to support conversations about milestones *most* children meet
 - The LTSAE program supports early identification through partnerships and multiple outreach methods
 - Developmental monitoring, surveillance, and screening are complementary but different
 - Can support parent-engaged developmental monitoring in early childhood systems
 - Can support parent-engaged developmental surveillance at well-child visits



Take Aways (Early Identification)

- Developmental delays and disabilities are common
- Earlier identification better for developmental delays and disabilities
- Universal developmental screening at recommended ages *AND* whenever there are concerns
- Monitoring, surveillance, and screening are part of a layered and continuous approach to early identification across systems
 - Common goal: children/families to be identified early
- Know the strengths and limitations of monitoring, surveillance, and screening tools you use when considering next steps
 - Parental concerns should be addressed regardless of monitoring, surveillance, and screening results



Common questions



- What do we teach trainees?
- Can we use with other resources?
- Will other milestone lists change?



TEIS Overview

- Tennessee Early Intervention System offers therapy and services for children ages birth up to three years old with developmental delays or disabilities



- TEIS provides services as outlined in Part C of the Individuals with Disabilities Education Act (IDEA)

TEIS Eligibility

- A child must demonstrate one or more of the following criteria to be eligible for services:
 - Diagnosis of one or more specific conditions likely to result in a developmental delay
- Diagnosis list link:
- <https://www.tn.gov/didd/for-consumers/tennessee-early-intervention-system-teis/eligibility-information.html>
- 25% delay in two developmental areas: motor, communication, cognition, social, and adaptive OR
 - 40% delay in one developmental area
- Eligibility is determined through multi-disciplinary approach, including a review of medical records
 - Eligibility evaluators are employed by agencies contracted through the state

Tennessee Early Intervention System

Making a Referral to TEIS



The Tennessee Early Intervention System (TEIS) is a program that provides services to children ages birth up to age three who have disabilities or other developmental delays. The TEIS program is a critically important program to supporting young children and their families to reach their optimal development. In December 2019, Governor Lee signed Executive Order No. 10 repositioning TEIS from the Department of Education to the Department of Intellectual and Developmental Disabilities (DIDD). This transition was made effective July 1, 2020.

- Online referral form via the TEIS website: <http://tn.gov/didd/teis>
- Call the district office that provides services for the child's county of residence
- Call the TEIS Referral line: 1-800-852-7157
- Download the MyTN app

start

SCREENING TOOLS AND REFERRAL TRAINING



- FREE training on developmental and other screenings in primary care
- Optional MOC Part 4 credit

Tennessee Chapter

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Questions?



ActEarly@cdc.gov

Toni Whitaker, MD, FAAP

twhitaker@uthsc.edu

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